



Please type a plus sign (+) inside this box 🛨

	PTO/SB/01	(10-0
Approved for use through	10/31/2002. OMB 065	1-00

Additional provisional application numbers are listed on a supplemental priority data sheet

PTO/SB/02B attached hereto.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

Application Number(s)

60/214,608

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number		2570-1-001 N				
First Named Inventor		Leonidas Stamatatos et al.				
COMPLETE IF KNOWN						
Application Number	09/891,609/					
Filing Date	June 26, 2001					
Group Art Unit	1645	;				
Examiner Name	Unk	nown				

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: HIV-1 VACCINES AND SCREENING METHODS THEREFOR (Title of the Invention) the specification of which is attached hereto as United States Application Number or PCT International was filed on (MM/DD/YYYY) June 26, 2001 (if applicable). Application Number 09/891,609 and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. **Priority** Foreign Filing Date Certified Copy Attached? **Prior Foreign Application** Country Number(s) (MM/DD/YYYY) **Not Claimed** YES Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

[Page 1 of 2]

Filing Date (MM/DD/YYYY)

June 27, 2000

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

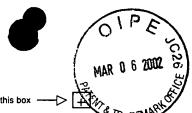


Please type a plus sign (+) inside ∞ ∞ ∞ + Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

TO A CONTRACTOR OF THE RESIDENCE AND A CONTRACTOR OF THE CONTRACTOR AND A SECTION ASSESSMENT AND A SECTION ASSESSMENT ASS	Principal State of the Commission of the Commiss	AND AND RESIDENCE OF STREET	HISTORY CONTRACTOR OF TRACE WA	L. L. SETTE - LANSING STR. LANSING	CONTRACTOR OF COMPANY AND ASSESSMENT OF THE PARTY OF THE	WESTERN AND STREET, THE TENEDS THE SETTING	W- INTERNATION CO.	
	Customer Nu or Bar Code		23565	a di i dan samen	OR 🗌	Correspondence a	ddress below	
Name								
Address							COPY OF PAR ORIGINALLY R	
Address				·				
City	··· ··· ··· ··· ·· · · · · · · · ·			State		ZIP		
Country	Telephone					Fax	-ax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INV	ENTOR:			A petiti	on has been fi	led for this unsi	gned inventor	
Given Name Leonidas Family Name Stamatatos (first and middle [if any])				atos				
Inventor's Signature						Date		
Residence: City Seattle		WA State		USA Country		USA Citizenship		
Mailing Address								
Mailing Address 4208 Dayton A	venue No	orth						
City Seattle	Was State	Washington State			8103	USA Country		
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor				gned inventor				
Given Name Susan W. first and middle [if any])			Family Name Barnett or Surname					
Inventor's Signature Sus a (e)	Zane	N				12/20 Date	101	
Residence: City San Francisco			CA State		USA Country	USA Citizenship		
Mailing Address							,	
Mailing Address 488 Los Palmo	os Drive							
City San Francisco	CA State			ZIP		Country		
Additional inventors are being named		suppleme	ntal Additio		tor(s) sheet(s) PT		I hereto.	





Please type a plus sign (+) inside this box

PTO/SB/02A (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE U.S. DEPARTMENT OF U.S. DEPAR

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1_ of _1_

Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname					
Indresh K.			Srivastava					
Inventor's Signature	<i>-</i>						12 20 01 Date	
Benicia Residence: City	CA State		USA Country				dia tizenship	
Mailing Address								
Mailing Address 848 Leeds Court								
_{City} Benicia	CA State			ZIP 94510 Count		ntry	_{try} USA	
Name of Additional Joint Inventor, if any:						unsigned inventor		
Given Name (first and middle [if any])			Family Name or Sumame					
Inventor's Signature							Date	
Residence: City	State			Country		Citizenship		
Mailing Address								
Mailing Address								
			710					
City		ate		ZIP] ((ount	Ŋ	
Name of Additional Joint Inventor, if any:			☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Sumame					
Inventor's Signature							Date	
Residence: City	State			Country		Citizenship		
Mailing Address								
Mailing Address				T				
City	State			ZIP		Country		

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.